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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number NIDN-10375

First Named Inventor Bjørnerud

**COMPLETE IF KNOWN**

Application Number 09 / 815,140

Filing Date 22-Mar-2001

Group Art Unit. To be assigned

Examiner Name To be assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method of Magnetic Resonance Imaging

the specification of which

(Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 03/22/2001 as United States Application Number or PCT International

Application Number 09/815,140 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9821038.8	GB	09/28/1998	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/106,695	11/02/1998	

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
This application is a continuation of PCT/GB99/03134 which is a CIP of US 60/106,695 filed 11/02/1998	09/21/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02A attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business with the Patent and Trademark Office connected therewith: ☒ Customer Number 22840 OR ☐ Registered practitioner(s) name/registration number listed below

Place Customer Number **22840**

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 22840 OR ☐ Correspondence address below

Name			
Address			
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Atle		Bjørnerud	
Inventor's Signature	<i>Atle Bjørnerud</i>		Date
Residence: City	State	Country	Citizenship
Post Office Address		Nycomed Imaging AS	
Post Office Address		Nycoveien 1-2, N-0401 Oslo, Norway	
City	State	ZIP	Country

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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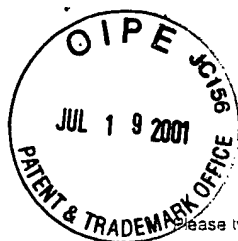
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Kenneth Edmund				Kellar			
Inventor's Signature				Date			
Residence: City		State		Country		US	
Post Office Address		1504 Cobblestone Court					
Post Office Address		Flemington, New Jersey 08822 US					
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Karen				Briley-Saebo			
Inventor's Signature		<i>Karen Briley Saebo</i>		Date		14/5/01	
Residence: City		State		Country		NO	
Post Office Address		Nycomed Imaging AS					
Post Office Address		Nycoveien 1-2, N-0401 Oslo, Norway					
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Lars				Johansson			
Inventor's Signature		<i>Lars Johansson</i>		Date		11-04-01	
Residence: City		State		Country		SE	
Post Office Address		Vänortsgatan 104					
Post Office Address		Uppsala, Sweden S-752 63					
City		State		ZIP		Country	

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	First Named Inventor	Bjørnerud
	<b>COMPLETE IF KNOWN</b>	
	Application Number	09 / 815,140
	Filing Date	22-Mar-2001
	Group Art Unit	To be assigned
Examiner Name	To be assigned	

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business with the Trademark Office connected therewith:

☒ Customer Number 22840 → 

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☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	PATENT OFFICE	TRADEMARK OFFICE

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto

Direct all correspondence to: ☒ Customer Number 22840 *OR* ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if anv))				Family Name or Surname			
Atle				Bjørnerud			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
				NO		NO	
Post Office Address		Nycomed Imaging AS					
Post Office Address		Nycoveien 1-2, N-0401 Oslo, Norway					
City		State		ZIP		Country	

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ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Kenneth Edmund				Kellar			
Inventor's Signature	Kenneth Edmund Kellar			Date	4/18/01		
Residence: City	State	Country	US	Citizenship	US		
Post Office Address	298 Reaville Road						
Post Office Address	Flemington, New Jersey 08822 US						
City	State	ZIP	Country				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Karen				Briley-Saebo			
Inventor's Signature				Date			
Residence: City	State	Country	NO	Citizenship	US		
Post Office Address	Nycomed Imaging AS						
Post Office Address	Nycoveien 1-2, N-0401 Oslo, Norway						
City	State	ZIP	Country				
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Lars				Johansson			
Inventor's Signature				Date			
Residence: City	State	Country	SE	Citizenship	SE		
Post Office Address	Vänortsgatan 104						
Post Office Address	Uppsala, Sweden S-752 63						
City	State	ZIP	Country				

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